

Michigan Department of Education (MDE)
Office of Special Education and Early Intervention Services (OSE/EIS)
Data Verification Form for Disproportionate Representation
July, 2008

The _____ School District:

_____ **A. accepts** the Disproportionate Representation ratios prepared by the OSE/EIS.

_____ **B. requests recalculation** of the Disproportionate Representation ratios by the OSE/EIS.

***If selecting option B,** please (1) complete the following table and include supporting documentation of the specified data changes requested with this form; AND (2) check YES or NO for each area below; AND (3) attach appropriate documentation.*

YES / NO ✓	Areas for LEA data corrections or extenuating circumstances	Background information and <u>action to take</u>	Supporting documentation required to be faxed to the OSE/EIS
	Inaccurate student race/ethnicity code	<ul style="list-style-type: none"> If you believe district student data are in error – SRSD vs. MI-CIS, please verify with your LEA authorized SRSD & MI-CIS users. <i>Data shown is taken from your district MI-CIS data entries from Dec. 1, 2006 and 2007 & SRSD data entries from FALL 2006 and 2007.</i> 	<ul style="list-style-type: none"> Page 1 of IEP form (with demographic information)* OR Student registration form signed by parent/guardian* OR Signed district exit papers* <p>* PLEASE CIRCLE CORRECT INFORMATION <u>Please specify documentation being sent:</u> 1. 2. 3.</p>
	Inaccurate student disability code		
	Inaccurate Operating or Resident District		
	Students exiting the district prior to the Dec. 1 child count of the particular school year, yet still appearing in MI-CIS report. (12-1-2006 or 12-1-2006).		
	Inclusion of students temporarily placed by state agencies in residential facilities within district boundaries (e.g. residential facilities for adjudicated youth) OR in county-wide consortia/center programs.	<ul style="list-style-type: none"> Verify building codes entered for these students with your LEA authorized SRSD/MI-CIS users. 	<ul style="list-style-type: none"> List from the identified facility or program of all LEA students involved during the school year, <u>including each student's racial/ethnic and disability codes.</u>
	Other — Specify:	<ul style="list-style-type: none"> 	<ul style="list-style-type: none">

 Signatures: LEA Superintendent/Designee

 Date signed

 LEA Special Education Director

 Date signed

Please email or fax to Lori Higgins, OSE/EIS, NO LATER THAN Sept. 12, 2008. HigginsL@michigan.gov fax: 517-373-7504

Date Rec'd.: _____ by: _____ (OSE/EIS staff) Action Taken: _____ on (date): _____